## PATENT APPLICATION FEE DETERMINATION RECORD

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Effective January 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I SMALL EN											OTHER	THAN
(Column 1) (Column 2)								TYPE			SMALL	
TOTAL CLAIMS			40					ΓE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			90 minus 20=		. 10		X\$	9=		OR	X\$18=	(RO
INDEPENDENT CLAIMS			minus 3 =		. 0		X4:	2=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							+14	0=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOI	AL		OR	TOTAL	930	
CLAIMS AS AMENDED - PART II										•	OTHER	THAN
_	(Column 1) (Column 2) (Column 3)						SMA	\LL I	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID	BER	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.30	Minus	** 3	0	=	X\$	9=		OR	X\$18=	
	Independent FIRST PRESE	* ENTATION OF M	Minus	PENDENT			X42	=		OR	X84=	
								0=		OR	+280=	
								TAL		OR	TOTAL ADDIT, FEE	
ADDIT, FEE ADDIT, FE ADDIT, FE (Column 1) (Column 2) (Column 3)											ADDII. PEEI	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA	FIAR	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		2	X\$ 9	)=	,	OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	0. 404	-	X42	=		OR	X84=	
	FINOT PRESE	INTATION OF MI	JUNPLE DE	PENDENI	CLAIM		+140	)=		OR	+280=	
							TO	TAL			TOTAL	
		<b>6</b> 1					ADDIT.	FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS		(Colum		(Column 3)				_		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	IER USLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus			=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	444		=	X42			ı	X84=	
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							$\dashv$		OR		
• 1	f the entry in color	mn 1 is lees than th	e entry in colo	mn 2 weits	"N" in and	umo 3	+140			OR	<b>∔280=</b>	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***THIS SPACE IS LESS THAN 3, enter "3."										OR ,	TOTAL ODIT. FEE	
•	The "Highest Num	nber Previously Pal	d For* (Total o	r Independe	nt) is the	highest numbe	r found in th	e app	ropriate box			